

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

Monthly Monitoring

NAME Ocean Spray Cranberries
ADDRESS 1480 State Route 105, Box 105
Aberdeen, WA 98520
COUNTY Grays Harbor
FACILITY
LOCATION 1480 State Route 105, Aberdeen

WA0003271			001		
PERMIT NUMBER			DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
		01			

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX. (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Flow	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT	REPORT	REPORT	MGD						n/a	CONT	RC
Total Categorical Mass BOD (5 Day) From Worksheet	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT			lbs/day						n/a	1/07	24HR
BOD (5-DAY) Sample	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						REPORT	REPORT	mg/L	0	1/07	24HR
Total Categorical Mass TSS From Worksheet	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT			lbs/day						0	1/07	24HR
TSS Sample	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						REPORT	REPORT	mg/L	0	1/07	24HR
pH	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT				6.5			9	S.U.	0	1/07	24HR
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)				TELEPHONE			DATE			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			AREA CODE	NUMBER		YEAR

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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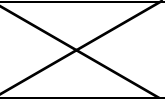
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LOCATION 1480 State Route 105, Aberdeen

WA0003271
PERMIT NUMBER

001
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
		01	To			

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX. (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Ammonia	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					6	8	mg/L	0	1/07
Total Residual Chlorine	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					0.4	1.3	mg/L	0	1/07
Fecal Coliform Bacteria	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					200	400	#/100 ml	0	1/07
Raw Cranberry Processed	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT	REPORT	REPORT	lbs/day					n/a	1/07
Cranberry Product	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT	REPORT	REPORT	lbs/day					n/a	1/07
Staff, Contributing	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT	REPORT	REPORT	#					n/a	1/07
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)			TELEPHONE			DATE		
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